PATENT APPLICATION FEE DETERMINATION RECORD

Application or Docket Number Effective December 8, 2004

| | | | | | <u>.</u> | | <u> </u> | 3 | 7U 666 | ` |
|--|--|--|---|--|--------------------------------------|--|------------------------|-------------|--|------------------------|
| | | CLAIMS A | S FILED - PAR | TI | | SMALL ENT | | | OTHER | THAN |
| | | • | (Column 1) | - | (Column 2) | 1176 | نب | OR | SMALL | ENTITY |
| U.S. NATIONAL STAGE FEES | | | 12 | | | RATE | FEE | | RATE | FEE |
| BASIC FEE | | | SMALL ENT. = \$ 15 | | GE ENT. = \$ 300 | BASIC FEE | | OR | BASIC FEE | 300 |
| EXAMINATION FEE | | | Satisfies PCT Article 33(1)- All other situations = (4) = \$50 / \$ 100 \$ 100 / \$ 200 | | EXAM. FEE | | | EXAM. FEE | 800 | |
| SEARCH FEE . | | | | | ther situations = \$ 250 / \$ 500 | SEARCH FEE | • | | SEARCH FEE | 400 |
| FEE FOR EXTRA SPEC. PGS. | | | minus 100 = / 50 = | | / 50 = | X \$ 125 = | | | X \$ 250 = | - |
| TOTAL CHARGEABLE CLAIMS | | | minus 20 = . | | X \$ 25 = | | OR | X \$ 50 = | | |
| IND | EPENDENT CL | AIMS | 3 minus 3 = . | | | X \$ 100 = | | OR | X \$ 200 = | |
| MUL | TIPLE DEPEN | DENT CLAIM PRE | ESENT N | | | + \$ 180 = | | OR | + \$ 360 = | |
| * If the difference in column 1 is less than zero, enter "0" in column 2 | | | | | | TOTAL | | OR | TOTAL | 900 |
| AMENDMENTA | Total Independent FIRST PRES | (Column 1) CLAIMS REMAINING AFTER AMENDMENT - | H N PRI | olumn 2) IGHEST UMBER EVIOUSLY AID FOR | PRESENT EXTRA | RATE X \$ 25 = X \$ 100 = + \$ 180 = TOTAL ADOIT. FEE | ADDI- TIONAL FEE | OR OR OR OR | RATE X \$ 50 = X \$ 200 = + \$ 360 = TOTAL ADDIT. FEE | ADDI- TIONAL FEE |
| | | (Column 1) | (C. | olumn 2) | (Column 3) | | | | | |
| AMENDMENT B | | CLAIMS REMAINING AFTER AMENDMENT | H N PRE | IGHEST UMBER EVIOUSLY AID FOR | PRESENT EXTRA | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | • | Minus ** | | = | X \$ 25 = | | OR | X \$ 50 = | |
| | Independent | • | Minus *** | | = | X \$ 100 = | | OR | X \$ 200 = | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | + \$.180 = | | OR | + \$ 360 = | |
| | | | | | | TOTAL ADDIT. FEE | | OR | TOTAL ADDIT. FEE | |
| • | If the "Highest Nu | mber Previously Pai | e entry in column 2, write d For IN THIS SPACE is d For IN THIS SPACE in | less than '2 | 0°, enter "20°. | | | | | |

The "Highest Number Previously Paid For" (Total or independent) is the highest number found in the appropriate box in column 1.